



VALLEYDALE CHURCH

Missional Living Manual

Generations

Helping Our Busy

Community Know

Christ and Live

for Him

Table of Contents

| Section: | Title: | Page: |
|----------|---|-------|
| 1 | Missional Living Committee | 5 |
| 1.1 | Purpose | 5 |
| 1.2 | Qualifications and Responsibilities | 5 |
| 1.3 | Membership | 6 |
| 2 | Mission Focus Areas | 7 |
| 2.1 | Overview | 7 |
| 2.2 | Global Team | 7 |
| 2.3 | Community Engagement Team | 8 |
| 2.4 | Mission Training & Education | 9 |
| 2.5 | Developing and Sending | 9 |
| 3 | Mission Partnerships | 11 |
| 3.1 | Overview | 11 |
| 3.2 | Mission Partnership Development Process | 11 |
| 3.3 | Mission Partnership Guidelines | 12 |
| 4 | Short Term Mission Trips | 13 |
| 4.1 | Overview | 13 |
| 4.2 | Trip Leader Guidelines | 13 |
| 4.3 | Partnership Guidelines | 13 |
| 4.4 | Child Protection | 13 |
| 5 | Financial Aid for Church Sponsored Short Term Trips | 14 |
| 6 | Appendices and Forms | 16 |
| 6.1 | Short Term Trip Application for Adults - Part A (General) ... | 17 |
| 6.2 | Short Term Trip Application for Adults - Part B (Medical) ... | 21 |
| 6.3 | Short Term Trip Applications for Adults - Part C (Legal) ... | 25 |
| 6.4 | Short Term Trip Application for Minors - Part A (General) .. | 26 |
| 6.5 | Short Term Trip Application for Minors - Part B (Medical) ... | 27 |

| | | |
|------|---|----|
| 6.6 | Short Term Trip Application for Minors - Part C (Legal) | 31 |
| 6.7 | Short Term Mission Trip Financial Assistance Request | 32 |
| 6.8 | Valleydale Short Term Mission Trip Leader Checklist | 33 |
| 6.9 | Participant Guidelines | 35 |
| 6.10 | Participant Financial Responsibilities and Deadlines | 36 |
| 7 | Revision History | 38 |

1 **MISSIONAL Living Committee**

The Missional Living Committee is provisioned by the church bylaws and charged with the responsibility to exercise oversight of missions' efforts and partnerships, as well as financial accountability of the Missions budget.

1.1 **Purpose**

The Purpose of the VC Missional Living Committee is to encourage and equip members of Valleydale to grow in missions' awareness and become involved in mission activities.

- Valleydale Church believes that every member is called to live on mission (Matthew 28:18-20). We believe all Churches are called to make disciples locally and globally (Acts 1:8). We also believe all churches are called to make disciples of all nations through church multiplication (Acts 13:1-3).
- Therefore, we desire to provide intentional and practical opportunities to equip all Valleydale members, incorporating Valleydale values, to live on mission locally and globally. We also desire to fulfill the Great Commission by making disciples of all nations through church multiplication.

1.2 **Qualifications & Responsibilities**

Members of the Missional Living Committee must have been a Valleydale member for at least 1 year prior to serving. They should have a heart for missions as evidenced by active involvement in mission related efforts.

The detailed responsibilities of the committee are identified in the church bylaws and summarized in the bullets below. Members are expected to regularly attend monthly meetings, promote missions throughout the church, and be actively engaged and involved in performing the specific duties of the committee as listed in the church bylaws.

- Develop and manage the Missions portion of the Church budget in cooperation with the Finance Committee.
- Provide intentional and practical opportunities to equip all Valleydale members, incorporating Valleydale values, to live on mission locally and globally.

- Develop mission partnership criteria, authorization, termination and implementation of partnership agreements, as well as establish/monitor accountability procedures for partnerships.
- Regularly communicate with the Church by providing information, opportunities, and needs.
- Use the diverse media outlets of the church to encourage the Church to live on mission.
- Actively seek God's will for future mission/ministry opportunities through steadfast prayer and fasting.
- Work with staff and church leaders to develop and implement a culture of living on mission daily to all church members.
- Maintain, update, and approve changes for the missions manual.

1.3 Membership

Members of the Missional Living Committee are nominated according to the bylaws and elected by the church body. Members serve a three-year term on a rotating basis arranged to ensure new members come in every year. Individuals may not serve on the committee more than three consecutive years unless approved by the church Elders.

As per church bylaws, the Missional Living Committee includes three officers: Chairman, Vice Chairman, and Secretary. In addition, ex-officio non-voting members of the committee who are not elected include the following:

- Senior Pastor
 - Missional Living Pastor
 - Community Engagement Team Representative (s)
 - Global Team Representative (s)
- Elder Representative



2 MISSION FOCUS AREAS

2.1 Overview

We believe the church has been commissioned to share the gospel throughout the world locally and globally (Acts 1:8). We actively engage in both areas. We also are committed to help equip individuals who have been called to a lifetime of service to Christ so they can be sent out into the world for the purpose of expanding the Kingdom of God (missionary, church planter, church replanter, professional, etc.).

2.2 Global Team (North America and International)

Valleydale has a desire for church planting and replanting across North America and all over the world. We believe church multiplication is integral to the spread of God's Kingdom (Acts 13). We desire to equip, send out, and partner with like-minded and kingdom focused individuals and churches for the purpose of Kingdom expansion. We encourage partners through missionary care, prayer, financial support, and mission trips. These activities are coordinated by the "Global Team".

2.2 A - Local Church Planting/Revitalization

Valleydale has a desire to replant/revitalize churches within our local community. Strategically we do this through church leadership, volunteers, prayer and financial support.

2.2 B - North America Church Planting

Valleydale has a desire to help with church planting efforts all across North America. Strategically, we do this through prayer and financial support. We also plan short term trips to serve these church planting efforts.

2.2 C - International Church Planting

Valleydale also has a desire to help with church planting efforts across all nations. Strategically, we do this through prayer and financial support. We also plan short term trips to serve these church planting efforts.

2.2 D-Other Efforts (Disaster Relief, Refugee Support, Scripture Distribution)

2.3 Community Engagement Team

Valleydale also has a passion and desire to live on mission in our local community. We desire every church member to live on mission, both personally (where they live, work and play) and corporately (gospel saturation within a 7-10 mile radius of Valleydale). Strategically we do this by providing engagement opportunities for our church members to reach our local community with the gospel of Jesus Christ. These activities are coordinated by the “Community Engagement Team”



2.4 Mission Training & Education

Valleydale Church prepares church members to live on mission, locally and globally, by providing training in the following areas.

- *Live on Mission Training* is a 5-week course designed to help equip and build confidence for every member to live on mission.
- Short-Term Trip Leader and Trip Participant training
- Sending Pipeline
- Church Planting/Replanting Resident

2.5 Developing and Sending

Acts 13:1-3 “Now there were in the church at Antioch prophets and teachers, Barnabas, Simeon who was called Niger, Lucius of Cyrene, Manaen a lifelong friend of Herod the tetrarch, and Saul. While they were worshiping the Lord and fasting, the Holy Spirit said, ‘Set apart for me Barnabas and Saul for the work to which I have called them’. Then after fasting and praying they laid their hands on them and sent them off”

Valleydale Church has a desire to plant and replant churches by equipping and sending out men and women to lead in future church plants/replants through our intentional sending pipeline.

Sending Pipeline

Valleydale Church missions sending pipeline is designed to help missionaries, professionals, retirees, church planting team members explore their calling, be equipped for mission and ministry, and engage in living on mission. The goal of the pipeline is for Valleydale to send a spiritually mature and equipped future church planting team leader/member. This is achieved through the sending pathway.

Sending Pathway

- Pre-assessment
 - Interview
 - Level 1 Training
 - Short-term experience
- Living on Mission in personal and corporate community
- Sending Pipeline Training
 - Level 2-3 Training
- Mid-Term or Vision Trip mission field experience
- Be Sent
 - Financial Support (if applicable)
 - Prayer support
 - Short-term and Long-term care plan

Valleydale Residency Program

Valleydale Church planting/replanting residency program is designed to help church planting/replanting residents explore their calling, explore church planting/replanting, be equipped for mission and ministry, and engage in living on mission. The residency program is a minimum of 12 months. Residents will be equipped in areas of: church planting/replanting; vision casting, leadership development, pastoral ministry, preaching and other ministry experience. The goal at the end of the program is for Valleydale to send a spiritually mature and equipped pastor to plant/replant a healthy gospel-centered church that glorifies God and to provide the resident with the strong principles that make Valleydale unique.

Family of Churches

We believe the vision and strategy of the Valleydale Family of Churches will help fulfill the Great Commission by partnering with other gospel-centered churches in order to take the gospel to North America and to the Nations.

The purpose of the Valleydale Family of Churches is to partner with 'Like-Minded' Churches Living on Mission, Making Disciples, and Multiplying.



3 MISSION PARTNERSHIPS

3.1 Overview

Valleydale encourages every member to be a part of mission activities. We desire all Valleydale members to live on mission. We seek to partner with other individuals and/or organizations in order to fulfill our Mission Statement “Generations Helping our Busy Community Know Christ and Live for Him”.

We believe effective partnerships are built around shared vision and values. Relationships are developed over time and always include shared responsibilities and accountability. The next two sections summarize the typical process and guidelines through which partnerships are established.

3.2 Mission Partnership Development Process

Mission partnerships are a key part of the Valleydale Church family. We strive to utilize an Acts 1:8 strategy by praying, giving and going to local and global destinations.. We seek to develop deep and lasting relationships with mission partners which we believe provide the best opportunity to fulfill the Great Commission. To identify the specific partnerships to which God is calling Valleydale, we regularly review and evaluate opportunities while diligently seeking out His will through prayer and careful consideration. A brief summary of how a typical mission partner relationship evolves is described below.

Evaluating

- Valleydale seeks to learn about the opportunity
- Missions Committee and Church leaders pray over the opportunity
- Missions Committee and Church leaders review qualification criteria including
 - Review of potential partner theology
 - Review of potential partner vision and strategyEvaluate potential with Valleydale - assess strengths and weaknesses
- Small team from Valleydale may participate in short term “vision trip”
- Joint prayer between Valleydale and potential mission partner

Establish Partnership

- Typically, a formal partnership agreement is established including:
 - Financial support
 - Prayer and care support
 - Regular communications (newsletter, prayer requests, etc.) established with partner
 - Periodic review (at least bi-annually) of partnership health, as well as annual review of support level and needs.

3.3 Mission Partnership Guidelines

Ephesians 4:15-16 ¹⁵ *Rather, speaking the truth in love, we are to grow up in every way into him who is the head, into Christ,* ¹⁶ *from whom the whole body, joined and held together by every joint with which it is equipped, when each part is working properly, makes the body grow so that it builds itself up in love.*

The Missional Living Committee and Church leaders will pray for discernment and guidance for potential partners and for open communication during the approval process.

- Potential partners are expected to be theologically aligned with the Baptist Faith & Message
 - 2000 (<http://www.sbc.net/bfm2000/bfm2000.asp>), Valleydale Church statement of beliefs, and our church covenant.
 - Expectations are for potential partners to provide a plan to the Missions Committee to include objectives, strategies, budgets and financial support details.
 - Missional Living Committee will choose mission partners only after prayer and careful consideration.
 - Potential partners' mission effort is expected to include a church planting or replanting focus.
 - Potential partners are expected to frequently communicate with Valleydale Church by consistently corresponding, attending Valleydale conferences and maintaining relationships.
 - Potential partners are expected to encourage Valleydale members' involvement on their mission field by supporting short and long term involvement.
-

4 SHORT TERM MISSION TRIPS

4.1 Overview

Short term mission trips provide an opportunity for individuals to live on mission and to actively participate in Christ's great commission (Matthew 28:16-20). As followers of Christ, we are to labor together for His cause. According to His command, we are empowered by His strength and His Spirit in His effort to advance His Gospel among all nations.

4.2 Trip Leader Guidelines

Trip leaders are responsible for the spiritual shepherding of all trip participants. They are expected to direct trip activities and be accountable for all decisions made in the field. Trip participants are expected to respect and obey decisions made by the trip leader. In addition, trip leaders are responsible for trip preparations (see appendix 6.8)

4.3 Participant Guideline

Team members participating in Valleydale sponsored trips are ambassadors of the Lord Jesus Christ. As teams, they represent Christ and Valleydale Church. This is a tremendous responsibility and each team member is to be above reproach in his/her actions, words, and attitudes. (See appendix 6.9)

4.4 Child Protection

The care and protection of children is a top priority for Valleydale. To ensure children encountered during mission trips are safe and secure from sexual and physical abuse, participants on short term mission trips will be required to follow a protocol similar to that of the individuals who work with children within the church. This procedure will require that all participants ages 18 and older receive protective training and go through a background screening process. The background screening process will include a criminal background check, an interview, and verification of personal references.

The child protection procedures must be completed prior to participation on short term mission trips and it must be renewed every three years. The cost of the background screening can be included in the trip budget. The background screening process is conducted via a paperless process (online) to minimize the need for Valleydale to collect personal data.

The trip leader will provide participants with instructions and directions to complete the process.



5.5 Financial Aid for Church Sponsored Short Term Trips

Participants are encouraged to independently secure funding for participation in short term mission trips. Seeking out the necessary support to fund participation in a short term mission trip is often a faith building exercise. Contact the Missions Office for guidance on raising support.

In some circumstances, funding support is available through the Missions Committee as summarized in the table below. All financial aid is subject to funds being available through Valleydale Church's mission budget and approval by the Missions Committee. **When necessary, the Missions Committee may reduce the financial aid percentage or alternate team members across two years based on available budget.**

| Trip Participant | Available Aid Guidance |
|--|--|
| Church Staff – Leading or Supporting within responsible Ministry Area (i.e., job assignment) | <p>Employees have the opportunity to minister locally and around the world on behalf of Valleydale on Church sponsored mission trips.</p> <p>Trip covered at 100% and spouse covered at 100% within responsible Ministry budget, subject to:</p> <ul style="list-style-type: none"> ● Trip approval by the Missions Committee ● Approval from supervisor |
| Church Staff (excluding Interns / Residents) | <p>Employees have the opportunity to minister locally and around the world on behalf of Valleydale on Church sponsored mission trips.</p> <p>One trip per calendar year covered at up to 90% and spouse covered at up to 90%, subject to:</p> <ul style="list-style-type: none"> ● Trip approval by the Missions Committee ● Approval by supervisor ● Must be a Valleydale Church member <p>Additional trips may occur with Missional Living Committee and Executive Team approval.</p> |
| Interns & Residents | <p>Interns and Residents are encouraged to take advantage of the opportunities to minister locally and around the world in view of their calling to ministry and on behalf of Valleydale on Church sponsored mission trips.</p> <p>One trip covered at 100% and spouse covered at 100%, subject to:</p> <ul style="list-style-type: none"> ● Trip approval by the Missions Committee ● Approval by supervisor <p>Additional trips may occur with Missional Living Committee and Executive Team approval.</p> |

| Trip Participant | Available Aid Guidance |
|---|--|
| and International Church Planting Coordinators Team | <p>One trip per calendar year covered at up to 90% and spouse covered at up to 50%, subject to:</p> <ul style="list-style-type: none"> ● Trip approval by the Missions Committee ● Must be a Valleydale Church member ● <p>Additional trips may occur with Missional Living Committee approval.</p> |
| Trip Leader | <p>One trip per calendar year covered at up to 90% and spouse covered at up to 50%, subject to:</p> <ul style="list-style-type: none"> ● Trip approval by the Missions Committee ● Must be a Valleydale Church member ● <p>Additional trips may occur with Missional Living Committee approval.</p> |
| Trip Participant | <p>Assistance is considered on an individual basis after fundraising attempts have been exhausted, funds are found to be insufficient, and a financial aid application request has been submitted.</p> <p>Considerations for financial aid are subject to:</p> <ul style="list-style-type: none"> ● Must be a Valleydale Church member ● Up to 50% covered per trip ● Financial aid limit of one (1) trip per calendar year ● <p>Additional trips may be covered with Missional Living Committee approval.</p> |

6 APPENDICES AND FORMS

The pages that follow contain a collection of standard forms and communication tools used to support mission related activities at Valleydale. The standard forms should be used to capture and communicate information where appropriate.

6.1 Short Term Trip Application for Adults – Part A (General)

Destination & Date of Trip: _____

Date of Application: _____

PERSONAL INFORMATION

Name (as appears on driver's license and/or passport if you have one)

Gender: [] M [] F Date of birth (mm/dd/yyyy) _____

Home address _____

City _____ State _____ Zip _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____ (c) _____

Email address (please print) _____

Do you have a Passport? (Required for Int'l Only): [] Yes [] No Passport # _____

Expiration Date (mm/dd/yyyy) _____ (must be at least six months after trip start)

TRIP INSURANCE BENEFICIARY (international travel only)

Name: _____ Relationship: _____ %: _____

Name: _____ Relationship: _____ %: _____

EMERGENCY CONTACTS (at least one required; indicate one with to make medical decisions)

Last Name: _____ First: _____ Relationship: _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____ (c) _____

Last Name: _____ First: _____ Relationship: _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____ (c) _____

CHILD PROTECTION POLICY

- Have you completed the Valleydale Church Child Protection Policy training within the previous year?? [] Yes [] No
- Have you had a background check conducted by Valleydale Church in the past three years? [] Yes [] No
- Has anything in your personal background changed that might impact your ministry to anyone under the age of 18? [] Yes [] No

YOUR WALK WITH CHRIST

The following questions serve as a challenge for those considering mission opportunities to examine one's obedience to Scripture and to make adjustments as the Holy Spirit directs. Please answer these questions in that same spirit. If you need to discuss this with someone, please contact the Missions Office at Valleydale Church.

YOUR INVOLVEMENT:

Church Membership: [] Valleydale [] Other _____

Please describe any previous mission trip experience:

Please list the ministries you have been involved with at your church including any leadership positions held:

YOUR GIFTS AND SKILLS:

Briefly list any previous cross-cultural experience in ministry (ex: inner-city, international students, refugees, another country, etc.) _____

Please list all specialized skills which you have developed and are able to use (ex: medical, music, drama, financial planning, graphics, bricklaying, carpentry, culinary, electrical, etc)

Please list your spiritual gifts:

YOUR TESTIMONY

If you are a believer, how and when did you come to know Jesus as your Savior?

How are you experiencing God in your life now? What is He teaching you?

Briefly describe why you feel God wants you to participate in this assignment?

Write out how you might share or explain the Gospel:

PERSONAL REFERENCES (one in each category who has known you at least 6 months)

1. Pastor or staff person or teacher:
Name _____ Phone # _____
2. A lay person in the church:
Name _____ Phone # _____
3. Additional reference (inside or outside the church):
Name _____ Phone # _____

NOT A MEMBER OF VALLEYDALE?

The _____ Church wholeheartedly recommends the applicant to Valleydale Church or Iron City Church as sound in his/her faith and spiritually equipped to serve on this volunteer project.

Signature of Pastor or small group leader: _____
Phone Number: () _____ - _____

Print Name of Pastor or small group leader: _____

Date Signed: _____

COVENANT

Believing that it is part of God's plan for my life to serve Him in this assignment, I pledge that I will prepare myself spiritually, physically, and emotionally. I will seek to have a servant's heart and to reflect Christ as I serve on this assignment. The training meetings for this mission project are critical for the spiritual unity and physical preparation of the entire team. I commit to faithfully attend all meetings at the scheduled time.

As a representative of Valleydale Church and an ambassador of Jesus Christ I agree to maintain the highest ethical and moral standards. I agree to repeat and follow the authority of the trip leader at all times, refrain from expressing political opinions, abstain from alcohol, tobacco, and illegal drug use, and comply with the cultural norms of the destination location I hereby certify that all information I have completed and submitted as part of this application process is true and correct.

Applicant Signature and Date:

Printed Name:

Trip Leader Signature: _____ (or)

Trip Leader Designee Signature and Date: _____

6.2 Short Term Trip Application for Adults – Part B (Medical)

Today's date: _____ Trip: _____

Last name: _____ First name: _____ Middle name: _____

Email: _____ Phone: _____

HEALTH HISTORY

You may be serving in an environment that has limited health care resources. In order to provide for your medical needs, your trip leader will review this form and bring it on the trip. The information will be confidential and used only if necessary for medical attention. Please provide complete and honest answers. Your trip leader may contact you for additional information.

Last Name: _____ First Name: _____

Do you have, or have you ever had, any of the following (circle and comment as needed)?

| | Circle | | Details | Date/NA |
|---|--------|-----|---------|---------|
| Allergies: Food, Medical, Environment | NO | YES | | |
| Do you carry an EPI pen? | NO | YES | | |
| BackProblems, Back Pain or Ruptured Disk(s) | NO | YES | | |
| Previous surgeries? | NO | YES | | |
| Cancers/Tumors | NO | YES | | |
| Previous broken bones | NO | YES | | |
| Shortness of Breath orAsthma | NO | YES | | |
| Do you use an inhaler? | NO | YES | | |
| Do you smoke? | NO | YES | | |
| Diabetes (Type I or II) | NO | YES | | |
| Do you require insulin injections? | NO | YES | | |
| Ear/Hearing Problems | NO | YES | | |
| Do you have hearing aids? | NO | YES | | |
| Epilepsy/Seizure Disorder | NO | YES | | |
| Thyroid Problems | NO | YES | | |
| Heart Disease | NO | YES | | |
| Previous Surgery | NO | YES | | |
| Pacemaker? | NO | YES | | |
| High Blood Pressure | NO | YES | | |
| Stroke/TIA | NO | YES | | |
| Taking Blood Thinners | NO | YES | | |
| Hernia (Location) | NO | YES | | |
| Arthritis (Degenerative or Rheumatoid) | NO | YES | | |
| Kidney Disease | NO | YES | | |
| Stomach Trouble/Ulcers | NO | YES | | |
| Migraine Headaches | NO | YES | | |
| Sleep Apnea | NO | YES | | |
| Do you use a CPAP? | NO | YES | | |
| Are you currently pregnant? | NO | YES | | |
| Dietary Restrictions | NO | YES | | |
| Physical Restrictions | NO | YES | | |
| Anxiety/Panic Attacks | NO | YES | | |
| Depression | NO | YES | | |

Any other significant illnesses,diseases, surgeries, hospitalizations not listed above: _____

Please list current medications including dosage, frequency, and condition being treated: _____

IMMUNIZATIONS (for informational purposes only, not recommendations.)

Required and recommended vaccines for international travel change frequently.

Please consult:

-www.cdc.gov

-www.uabmedicine.org (205.996.8728)

Tetanus/TDAP (required within 10 years) Yes No Year: _____

Primary Care Physician: _____ Phone #: _____

Health Insurance: _____ Policy #: _____

Please provide a copy of your Driver's License and Insurance Card as well as Passport (International) for identification and security purposes.

*Suggestion Note: Trips include Medical Insurance. It may be good to have a copy of the Insurance card.

Last Name: _____ First Name: _____

MEDICAL TREATMENT AUTHORIZATION AND POWER OF ATTORNEY

In the event I suffer an injury or condition during my participation in the Activities, including transportation to and from the Activities, which may endanger my life, cause disfigurement, physical impairment, or undue discomfort if medical treatment is delayed, and as the result of which I am unable, in the opinion of the Trip Leader, or his/her designee, to make an informed decision regarding such treatment, I hereby appoint the Trip Leader, or his/her designee, as my agent to act for me and in my name (in any way I could act in person) to make any and all decisions for me concerning my personal care, medical treatment, hospitalization and health care. This temporary power of attorney shall terminate when, in the opinion of my attending physician, I am competent to make informed decisions regarding the need for medical treatment. I hereby appoint the trip leader, _____, or his/her designee, _____, the authorization to release the information contained in this form to the Church and/or to other ministries or organizations as necessary during this trip. **(Notarization Required Annually)**

Date: _____ Participant Signature: _____

Date: _____ Notary Signature: _____

Notary Stamp

6.3 Short Term Trip Application for Adults – Part C (Legal)

GENERAL RELEASE AND HOLD HARMLESS AGREEMENT

I, _____, desire to participate in various trips, programs, events or activities (hereinafter collectively referred to as the “Activities”) operated or sponsored by Valleydale Baptist Church (hereinafter referred to as the “Church”).

I understand and acknowledge that the Church will not allow me to participate in the Activities without releasing and holding the Church harmless from any liability arising out of my participation in the Activities. I have investigated the risks involved in my participation in the Activities and fully understand and assume such risks. Specifically, I understand and acknowledge that I may suffer or experience, among other things, personal injury or bodily damage, medical disabilities, loss or theft of personal property, imprisonment, abduction and even death.

I request that the Church allow me to participate in the activities, and in consideration thereof agree hereby to release and forever discharge the Church, its officers and directors, and its employees, agents, and any parties volunteering on behalf of the Church, from all actions, causes of action, injuries, claims, damages, costs or expenses of any kind growing out of or related to any such activities in which I participate. I understand that this is a full and complete release of all injuries and damages, which I may sustain as a result of my participation in any activities, regardless of the specific cause thereof. **(Notarization Required Annually)**

This agreement is binding on my heirs, successors, and personal representatives.

Date: _____ Participant Signature: _____

Date: _____ Witness Signature: _____

Date: _____ Notary Signature: _____

Notary Stamp

6.4 Short Term Trip Application for Minors (Ages 17 and Under) – Part A (General)

Destination & Date of Trip: _____

Date of Application: _____

PERSONAL INFORMATION

Name (as appears on passport if you have one) _____

Gender: [] M [] F Date of birth (mm/dd/yyyy) _____

Home address _____

City _____ State _____ Zip _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____
(c) _____

Email address (please print) _____

Do you have a Passport? (Required for Int'l Only): [] Yes [] No Passport # _____

Expiration Date (mm/dd/yyyy) _____ (must be at least six months after trip start)

TRIP INSURANCE BENEFICIARY

Name: _____ Relationship: _____ %: _____

Name: _____ Relationship: _____ %: _____

EMERGENCY CONTACTS (at least one required; indicate one with to make medical decisions)

Father's Last Name: _____ First: _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____ (c) _____

Mother's Last Name: _____ First: _____

Tel. # (____) _____ (h) (____) _____ (w) (____) _____ (c) _____

Appointed Trip Guardian (Adult's Name): _____

6.5 Short Term Trip Application for Minors -(Ages 17 and Under) – Part B (Medical)

Today's date: _____ Trip: _____

Last name: _____ First name: _____ Middle name: _____

Phone: _____ Email: _____

HEALTH HISTORY

You may be serving in an environment that has limited health care resources. In order to provide for your health care needs and assure your medical safety, your team leader will bring your completed health form on the trip to use as a reference should you require medical attention. Please provide your honest answers to the following questions. The information you provide will be kept confidential. Please use the back of the form to expand on any answer you need to.

Last Name: _____ First Name: _____

Do you have, or have you ever had, any of the following (circle and comment as needed)?

| | Circle | | Details | Date/NA |
|--|--------|-----|---------|---------|
| Allergies: Food, Medical, Environment | NO | YES | | |
| Do you carry an EPI pen? | NO | YES | | |
| Back Problems | NO | YES | | |
| Previous Surgeries? | NO | YES | | |
| Cancer/Tumors | NO | YES | | |
| Previous Broken Bones | NO | YES | | |
| Shortness of Breath/Asthma | NO | YES | | |
| Do you carry an inhaler? | NO | YES | | |
| Diabetes (Type I or Type II) | NO | YES | | |
| Ear or Hearing Problems | NO | YES | | |
| Do you wear hearing aids? | NO | YES | | |
| Epilepsy/Seizure Disorder | NO | YES | | |
| Thyroid Problems | NO | YES | | |
| Heart Disease | NO | YES | | |
| Previous surgery | NO | YES | | |
| Pacemaker | NO | YES | | |
| High Blood Pressure | NO | YES | | |
| Stroke/TIA | NO | YES | | |
| Are you taking blood thinners? | NO | YES | | |
| Hernia (Location) | NO | YES | | |
| Arthritis (degenerative or rheumatoid) | NO | YES | | |
| Kidney Disease | NO | YES | | |
| Stomach Troubles/Ulcers | NO | YES | | |
| Migraine Headaches | NO | YES | | |
| Sleep Apnea | NO | YES | | |
| Do you use a CPAP? | NO | YES | | |
| Are you currently pregnant? | NO | YES | | |
| Dietary Restrictions | NO | YES | | |
| Physical Restrictions | NO | YES | | |
| Anxiety/Panic Attacks | NO | YES | | |
| Depression | NO | YES | | |

Any other significant illnesses, diseases, surgeries, hospitalizations not listed above? _____

Please list current medications including dosage and condition treating: : _____

IMMUNIZATIONS (for informational purposes only, not recommendations)

Required and recommended vaccines for international travel change frequently.

Please consult:

-www.cdc.gov

-www.uabmedicine.org (205.996.8728)

Tetanus/DTAP (**required within 10 years**) [] Yes [] No Year: _____

Primary Care Physician: _____ Phone #: _____

Health Insurance : _____ Policy #: _____

Please include copy of Driver's License and Insurance Card if applicable.

Last Name: _____ First Name: _____

MEDICAL TREATMENT AUTHORIZATION AND POWER OF ATTORNEY

In the event I suffer an injury or condition during my participation in the Activities, including transportation to and from the Activities, which may endanger my life, cause disfigurement, physical impairment, or undue discomfort if medical treatment is delayed, and as the result of which I am unable, in the opinion of the Trip Leader, or his/her designee, to make an informed decision regarding such treatment, I hereby appoint the Trip Leader, or his/her designee, as my agent to act for me and in my name (in any way I could act in person) to make any and all decisions for me concerning my personal care, medical treatment, hospitalization and health care. This temporary power of attorney shall terminate when, in the opinion of my attending physician, I am competent to make informed decisions regarding the need for medical treatment. I hereby appoint the trip guardian _____, and/or his/her designee, _____, the authorization to release the information contained in this form to the Church and/or to other ministries or organizations as necessary during this trip. **(Notarization Required Annually)**

Date: _____ Participant (Minor): _____

Date: _____ Parent/Guardian: _____

Date: _____ Notary Agent: _____

Notary Stamp

6.6 Short Term Trip Application for Minors – Part C (Legal)

GENERAL RELEASE AND HOLD HARMLESS AGREEMENT

I, _____, desire to participate in various trips, programs, events or activities (hereinafter collectively referred to as the “Activities”) operated or sponsored by Valleydale Baptist Church (hereinafter referred to as the “Church”).

I understand and acknowledge that the Church will not allow me to participate in the Activities without releasing and holding the Church harmless from any liability arising out of my participation in the Activities. I have investigated the risks involved in my participation in the Activities and fully understand and assume such risks. Specifically, I understand and acknowledge that I may suffer or experience, among other things, personal injury or bodily damage, medical disabilities, loss or theft of personal property, imprisonment, abduction and even death.

I request that the Church allow me to participate in the activities, and in consideration thereof agree hereby to release and forever discharge the Church, its officers and directors, and its employees, agents, and any parties volunteering on behalf of the Church, from all actions, causes of action, injuries, claims, damages, costs or expenses of any kind growing out of or related to any such activities in which I participate. I understand that this is a full and complete release of all injuries and damages, which I may sustain as a result of my participation in any activities, regardless of the specific cause thereof. **(Notarization Required Annually)**

This agreement is binding on my heirs, successors, and personal representatives.

Date: _____ Participant (Minor): _____

Date: _____ Parent/Guardian(s): _____

Parent/Guardian(s): _____

Date: _____ Notary Signature: _____

Notary Stamp

6.7 Short Term Mission Trip Financial Assistance Request Form

Name: _____ Phone #: _____

Email: _____

Destination of the Short Term Trip: _____

Date of Short Term Trip: _____

Deadline date for trip cost to be paid: _____

1. **Estimated Total Cost of entire Trip** (including airfare).....\$ _____

a. **Estimated Cost of Airfare** \$ _____

2. **Subtract:** Deposit Amount paid for trip from own finances.....\$ _____

3. **Subtract:** Additional Amount to be paid or expected to pay from own finances....\$ _____

4. **Subtract:** Amount contributed by financial partners.....\$ _____

5. **Financial assistance requested** (not to exceed 50% of estimated trip cost).....\$ _____

Please explain why you are requesting financial support:

Date: _____

Signature: _____

* If total amount raised including financial assistance exceeds trip cost, applicant agrees to refund the excess to the church

* Applicant agrees not to solicit financial support on church property

* Financial assistance available to Valleydale members only as approved by the Missional Living Committee

* Exceptions to these guidelines may be made by Missional Living Committee by majority vote

Appendix 6.8: Valleydale Short Term Mission Trip Leader Checklist

- _____ Pre trip meeting with Missions Pastor and member of global team
- _____ Meet with Missions Associate for trip logistics, planning and budget (as needed)
- _____ Meet with Missionary/church planter for trip plan and logistics (as needed)
- _____ Recruit Team
- _____ Valleydale Short Term Trip Form (all participants)
- 1. Medical Treatment Authorization and Power of Attorney (Notarized Form)
- 2. General Release and Hold Harmless Agreement (Notarized Form)

Contact Missions Office for information about Notaries available at Church Campus if needed.

- _____ Valleydale Background Check (all participants) (Checked by Missions Office)
- _____ IMB Child Protection Video (all participants)-IMB only
- _____ IMB Online Application (included background and child protection training)-IMB only
- _____ Build out trip budget
- _____ Build out trip schedule and deadlines
- _____ Meet with team about logistics of trip
- _____ Check all participants passports -if applicable

Participants must provide photocopies for the Missions Office.

- _____ Visa Applications/approval for all participants -if applicable
- _____ Trip Insurance (all participants) (Completed by Missions Office)
- _____ Immunization up to date -if applicable

Complete Best Estimate of Costs which should include:

- _____ Flights booked
- _____ Hotel or lodging
- _____ In country transportation
- _____ Food (Estimated Food Cost during travel and during stay.)

_____ Other costs

The Missions Associate will provide a digital Trip Tracker for the purpose of recording/estimating costs of the trip. You may add line items to detail the purpose of the cost.

_____ Paid money into Valleydale (all participants) (Missions Associate will assist.)

Mission Trip Participant Financial Responsibilities and Deadlines Form (Each participant will sign this form concerning timelines for payments and information concerning donations.)

_____ Team Training/meeting/planning/prayer

_____ Meeting with Partner Missionary/Church Planter with team (at least once)

_____ 10-15 prayer partners (per participant)

_____ Prayer Guide (sample attached)

_____ Daily Devotions (1 devotion plan per day) -sample attached

_____ In country money if available. Cash will be distributed in U.S.Dollars for conversion In-Country.

Cash from Church Office: Notify Missions Associate of amount 2 weeks before the trip. Money will be disbursed through the Finance Office.

_____ Copies of Medical forms, trip forms, passports, visa's from all participants

_____ Secure boarding passes

_____ Post trip meeting with Team -debrief

_____ Post trip meeting with Missions Pastor with team as well

_____ Post trip meeting with Missions associate for trip reconciliation (Provide all receipts.)

_____ Turn in unused money (Return to Missions Associate or Finance Office)

Appendix 6.9 - Participant Guidelines

Volunteers must submit to the Trip Leader's authority who submits to the authority of God. Due to the political instability and anti-American sentiment in various countries around the world, Valleydale asks that each volunteer refrain from expressing their political opinions while on the field.

If at any time while on the field a volunteer's behavior constitutes a problem, the Trip Leader has the authority to ask the volunteer to return home. Any additional cost incurred as a result of this action will be at that volunteer's expense. Before this step is taken, every effort to correct and modify the behavior will be made.

While on the trip, team members must respect and follow the authority of the leader at all times and honor the team covenant; refrain from expressing political opinions; abstain from the use of alcohol, tobacco, and illegal drugs; adhere to behavior standards set by the Trip Leader, missionary, national partner, or mission agency in regards to culture; become a servant to nationals, missionaries, and fellow team members; and be a learner at all times.

Appropriate dress for each mission trip will be determined by the Trip Leader, but will always be respectable attire as an Ambassador of Christ. Depending on the nature of the trip, minimum age requirements may be required.

Participants will make every effort to adhere to the financial responsibilities and guidelines as outlined in Section 6.9.

Appendix 6.10 - Participant Financial Responsibilities and Deadlines

*Suggested to add this section. Will need See Appendix 6.9 statement in appropriate place.

We are so excited that you are participating on the Mission Trip to: _____

Please read the information below carefully, then acknowledge by signing.

Once the estimated cost for a trip has been established the following payment dates are required:

Payment Deadline #1:

10% of estimated trip cost due upon receipt of application.

Payment Deadline #2:

Participants will pay the cost of the airline tickets (if known) or 50% of the total estimated costs whichever is the greater amount, 60 days prior to trip departure. (No ticket can be purchased without the funding to cover the cost.)

Payment Deadline #3:

Participants will pay the balance of the estimated cost, 30 days prior to trip departure.

Estimated Cost: The estimated cost for a short-term mission trip is determined by the team leader. The team leader will work diligently to get a close estimate of the cost of the trip prior to payment deadline #2. The team leader uses historical information, plus discussions with partners to establish an accurate cost of the trip.

The cost of a trip may be either over- or under-funded.

Overage:

Financial donations given to Valleydale Church for mission trips are consistent with the church's mission and are considered tax deductible. A donor may request a preference for a participant or a preference for a specific mission trip.

While effort will be made to apply a donation/payment to an indicated preference, Valleydale has full discretion and control over the use of donated funds.

No overages will be refunded to the trip participant/donor(s). In the event that the participants' individual expenses are over supported, if he/she does not raise full support, and/or cannot participate, gifts will be carefully utilized to support another facet of our ministry.

Examples of how these additional funds may be used: contributions may be utilized to cover future mission trips within constraints of church guidelines, used to assist other team participants, and/or be donated to a general scholarship fund for future trips.

Additional Costs:

Additional costs may be incurred if the trip has been under-funded based on the estimated costs due to extenuating circumstances. In this case, you may realize additional payments towards your trip. The Missions Committee will make every effort to make reasonable adjustments if possible.

Fundraising/Donations:

It is highly encouraged that trip participants only collect the required funds as determined by the estimated cost. Please remain advised of the totals you have raised by contacting your trip leader and/or the Missions Office at Valleydale (205-991-5282). Once you have collected the required funds, contributions may be utilized to cover future mission trips within constraints of church guidelines, used to assist other team participants, and/or be donated to a general scholarship fund for future trips. However, it will be your responsibility to notify your contributors.

Trip Participant Cancellations:

Trip cancellations must take place prior to the purchase of airline tickets and payments of other incurred expenses. Otherwise you will be responsible for these costs.

I understand and agree with the information provided above concerning my financial responsibilities for this Short-Term Mission Trip.

Signature: _____ Date: _____

Printed Name: _____

7 REVISION HISTORY

The initial revision of the Missions Manual was compiled during the inaugural year of the Mission Committee. A history of all changes is provided below.

| Date | Revision | Description |
|-----------|-----------|---|
| 12/1/2015 | 12/2015 | First Formal Release of Missions Manual |
| 1/17/2022 | 1/17/2022 | Second Formal Release of Missions Manual |
| 1/5/2023 | 1/5/2023 | Revision & Edits completed by Linda Hogue |
| | | |